



MOUNT BARKER  
WALDORF SCHOOL

*Mount Barker Waldorf School Foundation*

*Student Application &  
Personal Statement Form*

## Application for the Mount Barker Waldorf School Foundation Scholarship 2022

### Applicant details

Please note our preferred method of correspondence is email, otherwise all mail will be sent to the postal address.

Date of Application:	Family Name:	
First Name:	Preferred Name:	
Date of birth:	Age:	Year Level in 2021:
Home address:		
	Suburb/Community:	
State:	Postcode:	
Postal address: (if different to above):		
	Suburb/Community:	
State:	Postcode:	
Telephone (home):	Mobile:	
Email:		

**Are you of Aboriginal or Torres Strait Islander descent?** (please select one of the following boxes).

Aboriginal     Torres Strait Island     Both Aboriginal and Torres Strait Islander

School discount card:                       Yes     No

### Checklist

The following checklist may be helpful to ensure all relevant information is submitted:

- Student Application Form** (all sections must be completed, and the form must be signed by the applicant and their parent/guardian).
- Personal Statement** (up to 200 words to be completed by the applicant in their own handwriting)
- Name and contact details of two referees**
- Parent/Guardian consent and statement regarding the need for financial support and or School Card details**
- Academic record and other relevant achievements**
- Attendance records** (to be supplied by the applicants' previous school for 12 months preceding the application date).
- Returned before Friday, 27 August, 2021.**
- \$20 application fee**

## Parent/Guardian Details

Please note our preferred method of correspondence is email, otherwise all mail will be sent to the postal address.

### Parent/Guardian 1

Family Name: \_\_\_\_\_ Given Names: \_\_\_\_\_

Relationship to applicant (eg mother, father, guardian): \_\_\_\_\_

Home address: \_\_\_\_\_

Suburb/Community: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal address (if different to above): \_\_\_\_\_

Suburb/Community: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone (home): \_\_\_\_\_ Mobile: \_\_\_\_\_

Telephone (work): \_\_\_\_\_ Facsimile: \_\_\_\_\_

Home email address: \_\_\_\_\_

Work email address: \_\_\_\_\_

**Are you of Aboriginal or Torres Strait Islander descent?** (please select one of the following).

No  Aboriginal  Torres Strait Island  Both Aboriginal and Torres Strait Islander

### Parent/Guardian 2 (if applicable)

Family Name: \_\_\_\_\_ Given Names: \_\_\_\_\_

Relationship to applicant (eg mother, father, guardian): \_\_\_\_\_

Home address: \_\_\_\_\_

Suburb/Community: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Postal address (if different to above): \_\_\_\_\_

Suburb/Community: \_\_\_\_\_

State: \_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone (home): \_\_\_\_\_ Mobile: \_\_\_\_\_

Telephone (work): \_\_\_\_\_ Facsimile: \_\_\_\_\_

Home email address: \_\_\_\_\_

Work email address: \_\_\_\_\_

**Are you of Aboriginal or Torres Strait Islander descent?** (please select one of the following).

No  Aboriginal  Torres Strait Island  Both Aboriginal and Torres Strait Islander

## Referees Contact Details

Please provide two contacts as referees. You may include family friends, community members, school principal/teacher etc.

1. Name:	2. Name:
Relationship to applicant:	Relationship to applicant:
Phone:	Phone:
Email:	Email:

## Current School

Please provide details of the school you are currently attending. Proof of enrolment and your most recent school report (including subjects completed and results) must be submitted with this application. Documentation must be on school letterhead and signed the Principal or other authorised school representative.

Name of school:		
Address of school:		
Suburb/Community:	State:	Postcode:
School phone:	School facsimile:	
School email:		

Please select one of the options below to indicate the type of school you are currently attending:

- Government school                       Independent school  
 Other (please provide details)

Please provide details of a contact person at this school

Family Name:	Given Names:
Position (Principal, Teacher, Counsellor etc)	
Phone:	Mobile:
Facsimile:	Email:

If your current school is not a primary school, please provide details of the **last primary school** you attended.

Name of school:		
Address of school:		
Suburb/Community:	State:	Postcode:
What is the highest level you completed (eg Year 7):	What year was this?	
Did you successfully complete this level?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

## Questions to the applicant

In the following section please answer all of the questions to support your application.

1. What are your favourite subjects and why?

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2. What would you like to do when you finish your secondary schooling?

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3. Have you represented your school or community in any way (eg student groups, school captain or leader, community groups, sporting teams etc)? List any awards or certificates that are relevant to this application.

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4. Please give clear examples where you have shown good leadership skills.

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5. Have you previously received a grant or scholarship?

- Yes       No (If yes, please provide details below,  
including source, reason, amount and date)

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6. Are you involved in any community activities outside of school?

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7. What are your hobbies and interests?

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8. Please provide an introduction to your family and home life.

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9. Is there anything else you would like us to know that is relevant to this application?

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### **Application Process**

A requirement of the application process is that shortlisted applicants attend an interview with their parents or guardian. This interview is to establish whether you meet the requirements set out in the programme guidelines.

Do you agree to this?       No       Yes

### **Agreement and Signature**

By submitting this application, I confirm that the information in this form is true and complete, and I understand and accept the conditions of application set out in this form. I will provide documentary evidence in support of this application where requested.

Student Name:

Student Signature:

Date:

Parent/Guardian Name:

Parent/Guardian Signature:

Date:

